Remembering to test

Keeping chlamydia testing at the front of mind is difficult. This is why regular feedback and useful reminder tools are central to ACCEPt.

A constant refrain from many of the GPs in our intervention arm is that when it comes to testing, it’s easy to forget. This is not surprising. Most of the chlamydia testing for young people aged 16–29 years will be for entirely opportunistic – a simple preventive health measure that a patient probably hasn’t specifically requested during their visit.

While we at ACCEPt sometimes live and breathe chlamydia, we understand that GPs have numerous other concerns. Adding an additional task to an already time-pressured workload is not easy.

But that doesn’t mean we aren’t going to try everything in our power to get GPs to test all the young people they can. In this issue of ACCEPtability, we have outlined some of the ways that ACCEPt can help intervention clinics keep their chlamydia rates up. Feedback (below) and reminder tools (overleaf) are important, but keeping in mind what you don’t need to do (such as taking a detailed sexual history every time) can also help to streamline chlamydia testing.

Associate Professor Jane Hocking
Principal Investigator, ACCEPt

Sexual history? Not so fast!

Speaking with young adults about their sexual health can be uncomfortable for both patient and clinician. That’s why sexual histories need only be taken when necessary.

Annual chlamydia testing is recommended by RACGP for young people aged 16–29 years as a sensible preventive health measure. When offering a test to a patient in this age group, there is no need to take a detailed sexual history. A simple offer, based on the patient’s age, is sufficient.

A 2008 study of young women’s views of chlamydia screening in general practice found that women preferred to be offered a chlamydia test without having to provide a detailed sexual history. The study, ‘Take the sex out of STI screening! Views of young women on implementing chlamydia screening in General Practice,’ conducted by ACCEPt investigators was published in *BMC Infectious Diseases*. Similar sentiments have been expressed by young people interviewed for ACCEPt.

‘Taking the sex out of STI screening’ and offering a chlamydia test to all young people aged 16–29 years each year helps to reduce the stigma surrounding chlamydia testing. Patients won’t feel as though they have been targeted for testing because of their sexual behaviour if testing becomes a regular part of their general practice contacts.

If a patient tests positive for chlamydia, a non-judgmental sexual history can be taken to help identify other tests that may be necessary, and assist the patient in identifying sexual partners to contact.

How many young people do you test?

The more you test, the more you remember to test, which is why clinics are continuing to increase their testing rates as time goes on. Letting clinics and GPs know how many young people they are testing from one month to the next, or from one quarter to the next is one way that ACCEPt is helping GPs track their performance over time.

- **Quarterly GP reports:** These individualised reports let GPs know how many young people aged 16–29 years they have tested at least once over a three month period. The reports indicate what percentage of eligible young people was tested in that time, and the total incentive payments due to be paid.
- **Monthly clinic reports:** Each month, clinics in the intervention arm of ACCEPt will be emailed a report on the overall testing rate achieved at the clinic. Clinics can also see how they compare to the highest testing clinic for the month.
“Remembering is the hardest part” – useful reminders

The RACGP Red Book guidelines recommend that all young people aged 15–29 years should be tested annually for chlamydia. But remembering to offer a young person a chlamydia test can be difficult, especially if they have presented for a non–sexual health consultation.

ACCEPt has developed a range of tools to help GPs remember:

Computer alert:
For clinics using Medical Director or Best Practice software, the RACGP side-bar can be programmed with an ACCEPt chlamydia alert. The alert automatically pops up for patients who are aged 16–29 years, providing that a GP is logged in to the side-bar as well as their medical records software.

The RACGP side-bar comes with other preventive health alerts and GPs can customise the side-bar by switching alerts on or off.

‘Chlamydia: Catch it!’ cards, posters and pens:
For GPs who don’t use Medical Director or Best Practice, ACCEPt has developed a range of ‘Chlamydia: Catch it!’ reminders. Discreet desktop postcards remind GPs who to test and who to retest for chlamydia. Pens are an additional prompt.

Waiting room or Rest room posters:
Reminding young people to ask for a chlamydia test every year can also help to ensure everyone is tested regularly. ACCEPt can provide clinics with colourful posters for the waiting room, consultation rooms or rest rooms.

Chlamydia: Catch it!

Test: 16-29 year old men and women, every year

Recall: 3 months for positive tests
12 months for negative tests

Showcasing ACCEPt

The 20th Meeting of the International Society for Sexually Transmitted Diseases Research (ISSDR), and the 14th World Congress of the International Union against Sexually Transmitted Infections (IUSTI) took place in Vienna on July 14–17. The following presentations were made:

- Anna Yeung (PhD student, University of Melbourne): speech titled “Is concurrency, number of partners or duration of partnership the most important factor associated with chlamydia in young Australian adults?”
- Jane Hocking (Principal Investigator): poster titled “The Australian Chlamydia Control Effectiveness Pilot (ACCEPt): early results from a randomised trial of annual chlamydia screening in general practice”
- Rebecca Lorch (PhD student and Project Officer, Kirby Institute, UNSW): poster titled “Are Australian general practitioners and practice nurses equipped for increased chlamydia testing? Findings from ACCEPt”

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